		2018
HOUSE OF REPRESENTATIVES	FORM B	Page 1 of 7
SURE STATEMENT	For New Members, Candidates, and New Employees, ATIVE RESOURCE	LATIVE RESOURCE
w Janz	/8 Daytime Telephone:	18 MAY 17 AM II: 57
		OF REDICTIONS
New Member of or Candidate for State: California U.S. House of Representatives District: 22 Candidates – Date of Election: 06/05/2018	Check if Amendmen	(Office Use Only)
New Officer or Employee Staff Fi	Staff Filer Type (If Applicable): Period Covered: January 1, 2017 Shared Principal Assistant December 31, 2017	Period Covered: January 1, 2017 A \$200 penalty shall be assessed against any to December 31, 2017 individual who files more than 30 days late.

Page 1 of 7

Name: Andrew Janz

FILER STATUS

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UNITED STATES HOUSE OF FINANCIAL DISCLOSURE STATE

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

The state of the s			
 Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period? 	Yes X No	E. Did you hold any reportable positions during the reporting Pes No	Yes X No
Did you or your spouse have "earned" income (e.g., salaries, sonoraria, or pension/IRA distributions) of \$200 or more during the eporting period?	Yes X No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes X No
Did you, your spouse, or your dependent child have any reportable ability (more than \$10,000) at any point during the reporting period?	Yes X No	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	Yes X No
ATTACH THE CO	ORRESPONDING SC	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Yes No X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes No X

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SCHEDULE A - ASSETS & "UNEARNED INCOME

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Name:		
Andrew Janz		
Page 2 of 7		

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Stifel 401 (k)	Betterment	office space lease	E-Trade	ABC Hedge Ford X	Simon & Schuster	Maga Corp Street	sil interest-bearing accounts, if the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and onlying accounts in a privately-held to investment, provide a complete address or description, e.g., "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its accivities, and its geographic location in Block A. Exclude: Your personal residence, including second forms and vaccipersonal residence, including second interest in, or income defined from, a federal retirement program, including the Thrit Sevings Plant you report a privately-traded fund that is a second investment program, including the Thrit Sevings Plant of your spouse (5P) or accepted investment Fund, please check the "Eiff box. If you so choose, you may indicate that an esset of income source is that of your spouse (5P) or dependent child (DC), or jointy held with snyone (3F), in the opsonal column on the far left.	ent and other seeh accounts, total the amount in	For all IRAs and other retirement plans (such as 401(s) plans) provide the value for each asset hald in its account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only licker symbols).	identify (a) each sessit held for investment or production of income and with a fair market value succeeding \$1,000 at the end of the reporting period, and (b) any other reporting sesses or except of income which generated more than \$200 in "unearned income during the year."	Assets and/or income Sources	BLOCK A
X	X	X	X	×		×	None \$1:\$1,000 \$1:001-\$15,000 \$15,001-\$50,000 \$80,001-\$100,000 \$100,001-\$250,000 \$250,001-\$500,000 \$800,001-\$5,000,000 \$5,000,001-\$5,000,000 \$5,000,001-\$5,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000 \$25,000,001-\$50,000,000	\$ 0 m m x x		*Column M is for assets hald by your spouse or dependent ohld in which you have no interest.		Value of Asset	STOCK B
X	X	×	X	Patricial in the Control of the Cont	Portion	X	NOME DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DESERRED Other Type of Income (Specify: e.g., Partnership Income or Fame Income)			"None" If the asset generaled no income during the reporting period.	Check all columns that apply. For accounts that gapty. For accounts that gapty is come (such as 401(t), IFA, or 529 accounts), you may obset the "Tax-Ovierned" column. Dividends, the man, and explicit gales, even it rehivested, must be disclosed as impose for assess held in toxable accounts. Check	Type of Income	BT OCK C
X	X	×	×	×	X		Noise	Current Year			For assets for which you checked "Tax-Deterred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, interrest, and capital gafes, even if referented, invest be disclosed as income for assets held in taxable accounts. Check "None" if no income was seried or generated. "Column XII is for assets held by your spouse or dependent child in which you have no interest."	Amount of Income	BLOCK D
					X	X	\$891-\$1,000 \$1,001-\$2,500 \$1,001-\$2,500 \$2,501-\$6,000 \$5,001-\$15,000 \$15,001-\$15,000 \$150,001-\$1,000,000 \$1,000,001-\$5,000,000 \$1,000,001-\$5,000,000 \$2,000,000 \$3,000,000 \$3,000,000	Preceding Year			u may check the "None" column. For all other spiste box balow. Dividends, interest, and sesse for sessets held in taxable accounts. Id in which you have no interest.	70	

SCHEDULE A - ASSETS & "UNEARNED INCOME" Name: Andrew Janz

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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name: Andrew Janz Page 4 of 7

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for

					Therapy Practice of Heather Walker Janz, LMFT	ice	Origino Coursy Beard of Education	Examples: Side of Market	ASC Trade Association, Ballemore, MD (July 15)	Source (include date of receipt for honoraria)	
					Spouse Income	Salary	Spouse Salary	Series Constant	Honogrum	Туре	
					\$39,167.00	\$82,499.49	NA.	120,000	\$0	Filing	Am
					\$937.00	\$80,321.08	XIX	\$1,000	\$500	Prec	Amount

SCHEDULE D - LIABILITIES

Name: Andrew Janz Page 5 of 7

Report liabilities of over \$10,000 cwed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

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ال الله الله الله الله الله الله الله ا	Creditor		Date Liability Incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$506,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Example First Bank of Wilmington, DE	Vilmington, DE	96/5	Mortgage on Rental Property, Dover, DE				×						_	
SP	Mohela-Department of Education		06/11	Student Loans		X	,								
	Discover Student Loans	0,	05/12	Student Loans	X										
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SP	Wells Fargo	0	09/05	Credit Card		×									
											L	<u></u>			

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar vasir. First-waar candidates and new emphorage mont most than current calendar vasir second-year candidates and new emphorage mont most held in the current calendar vasir second-year.

period and the current calerical year. First-year Caledidas	Defice and the current year. First-year canadians and have employees report position for the content of the current of the cur
Position	Name of Organization
Treasurer	Fresno County Prosecutor's Association
Member	Stanislaus State University Alumni Council
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SCHEDULE F - AGREEMENTS

ant or arrangement that you have with respect to: future employment: a leave of absence during the period of government service:	
respect to: fut	Name:
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ve of absence during	
the period of	
government s	Page 6 of 7
ervice:	of 7

employer. Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government, or continuing perticipation in an employee welfare or benefit plan maintained by a former

Date	Parties to Agreement	Terms of Agreement
	N/A	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

200	gg - no commence of the second management of the second process of the second grant and the second grant of the second grant o	digitaring the state of the state of pasts and state of the state of t
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services
N/A		

FILER NOTES (Optional)

Name: Andrew Janz

Page 7 of

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FILER NOTES (Optional)

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DOCUMENT ID	8a1705012dc32a6c37328da14c8c9c566ce372c3
FILE NAME	LA CY 2017 Financsure Form B_1.pdf
3 altit	2017 Financial Disclosure Forms- Ready to Sign

Document History

O5/14/2018 The C	The document has been completed.
	Signed by Andrew Janz (andrew@andrewjanzforcongress.com)
	Viewed by Andrew Janz (andrew@andrewjanzforcongress.com)
ons) OTU ES:86:30 Treath	Sent for signature to Andrew Janz (andrew@andrewjanzforcongress.com) from heather@janztherapy.com 99.181.391.195